



Gladue Report Request Form

Request Date: (dd/mm/yyyy): _____ Court File (CV) #: _____

Judge/Justice of the Peace: _____

Crown Counsel: _____

Contact Info: _____

Defence Counsel: _____

Contact Info: _____

Court Location (City/Community): _____ Provincial ____ Federal ____

Report Required for: Bail Sentencing Other (Specify): _____

Name of Accused Person/Offender: _____

Band Name: _____

Address: _____

Home Ph: _____ Cell Ph: _____

Email Address: _____

Charges: _____

Crown's Sentencing Position: _____

Accused Person/Offender is: In Custody (facility if known): _____
 Out of Custody

Court return date: (dd/mm/yyyy): _____ Purpose: _____

Date required: (dd/mm/yyyy) _____

Please attach a copy of the Synopsis, CPIC, Charges, and Crown Screening Form

Please Submit Request to:
George Edwards, Gladue Team Leader
gedwards@nanlegal.on.ca Fax: 807-622-1774